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AUTHOR Barker, Ann S.
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ABSTRACT

A study was conducted to determine whether long-term residential therapeutic wilderness programming best serves males or females. The Hope Center Wilderness Programs in east Texas use a reality therapy-based peer group culture. Forty emotionally disturbed and juvenile delinquent youths were surveyed, 20 of each gender. On an 11-item questionnaire, students indicated that the areas the wilderness program helped them with most were, in rank order, communicating with family, controlling temper, staying out of legal trouble, school, and remaining drug free. No significant gender difference was found in participants' success in the program. Boys had a higher rate of serious incidents and were more likely to be on probation or parole. Adolescents in placement as well as their families believed that they benefitted from treatment through the wilderness programs. Appendices include a brochure describing the Hope Center's Wilderness Programs and the study questionnaire. (Contains 18 references.) (SW)

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ED 386 001

SUCCESS OF EMOTIONALLY DISTURBED ADOLESCENTS IN A THERAPEUTIC WILDERNESS PROGRAM

by

Ann S. Barker

A research paper

submitted in partial fulfillment of

the requirements for ASE/CNE 579

Sam Houston State University

August 1995

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Abstract

Success of Emotionally Disturbed Adolescents in

a Therapeutic Wilderness Program

by

Ann S. Barker

Emotionally Disturbed adolescents are often in need of specialized services to develop socially acceptable patterns of behavior. This study takes a snapshot view of gender differences in response to one such service, long-term residential therapeutic wilderness programs. The programs studied, in July 1995, are located in East Texas and run by Hope Center, Youth and Family Services.

The purpose of the study was to determine if this type of programming best serves males or females. Forty emotionally disturbed and juvenile delinquent youths were surveyed, 20 of each gender. Data was collected through use of an 11 item questionnaire which surveyed behavioral transgressions and attitudes of the youths in placement. Chi-square analysis was completed on five variables. The variable of number of Serious Incidents, with a $p=0.16$, was used to determine that there was no significant difference between the success of boys and girls in the programs. Significance was established at the $p < .05$ level.

The study did determine, through preponderance of data, that adolescents in placement believe that they benefitted from treatment received in the wilderness programs. In addition, adolescents indicated that their families also believe that the youths have made behavioral improvement.

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Chapter I

INTRODUCTION

General Introduction

Crime is on the rise and becoming more violent, demographic evidence shows a further upward trend in the coming years (DiUlio, 1995, p.55). Violent crime is on the rise particularly with adolescents. The murder rate among adolescent offenders has increased 165 percent since 1985 (DiUlio, 1995, p.57).

Some believe that America's youth must be stopped, one method of stopping the crime cycle is through treatment. Programs designed to work with adolescents have grown in number in recent decades (Straus, 1994, p. xi). An outgrowth of this trend is the development of Therapeutic Camping and NATWC the National Association of Therapeutic Camps (Buie, 1995). NATWC has a membership of over one hundred programs nationwide (Buie, 1995).

Two of these programs are run in Texas by Hope Center, Youth and Family Services, based in Houston. Hope Center's Wilderness Programs serve emotionally disturbed and juvenile delinquent youth with the use of a Reality Therapy based peer group culture (Appendix A).

Statement of the Problem

The problem is that emotionally disturbed adolescents have had difficulty functioning in a socially appropriate manner.

Purpose

The purpose of this study is to determine if emotionally disturbed adolescent males and females have similar success in a Reality Therapy based therapeutic wilderness program.

Importance of the Study

This study may enable the Directors of therapeutic camps to adapt their programming to meet the gender specific needs of their clients. It may also determine the effectiveness of this milieu with emotionally disturbed adolescents.

Definition of Terms

1. Away Without Permission (AWOP). Report written when a child leaves their Program group without permission.

2. Program group. Assembly of up to 12 youth of similar age with three counseling staff.

3. Serious Incident. Behavioral or medical occurrence which is out of the realm of "normal" experiences of the client (i.e. sexual abuse outcry, wound requiring attention, physical aggression which did not result in restraint).

4. Restraint. Crisis intervention technique utilized when a client attempts to hurt themself, someone else, runaway, or destroy property.

Null Hypothesis

There is no significant difference between the success of male and female emotionally disturbed adolescents in a therapeutic wilderness program.

Limitations and Delimitations

The study is limited to the Hope Center, Youth and Family Services' two therapeutic wilderness programs. It is delimited to adolescents enrolled in the Southeast Texas Programs in the summer of 1995.

Assumptions

1. Individual progress of the clients will always vary in accordance with their intellect, willingness to cooperate, and desire for change.

2. Behavioral goals for each youth are dependent on their needs.

3. Treatment is a constant, despite differences in counseling styles between staff members.

4. Programmatic differences between campuses will not impact treatment.

Chapter II

REVIEW OF RELATED LITERATURE AND RESEARCH

The United States Census Bureau numbers in 1986 indicated that 25 percent of youth age 10-14 live in single parent homes, with 70 percent of these parents employed outside the home (Dryfoos, 1990, p. 21). Some may surmise that as a result of these growing numbers of single-parent homes, youths have additional responsibilities within the family. Family patterns are shown to impact the rate of acting out behavior, particularly suicidality in adolescence (Heillig, 1983, p. 149).

Heillig surmises that adolescents believe that there is an external locus of control for their emotional and behavior problems. Similar findings were reported by Johnston on the subject of teenage drinking. A leading factor in teenage substance abuse is the temporary escape it provides from societal pressure and stress (Johnston, 1991, p. 87). Johnston also noted that substance abuse among adolescents decreased coping mechanisms and increased acting out behavior. In part, teens are enabled with their drinking by a society whose advertising focusses on the younger population and in which adults often abuse (Johnston, 1991, p. 88).

Substance abuse is one indicator of at-risk behavior in today's youths (Dryfoos, 1990, p.95). Dryfoos further delineates at-risk behaviors as; truancy, poor parental bonds, urban living, early initiation in problem behaviors, and low tolerance to peer influence. Teens follow their peers to gain acceptance and to help define their identity (Agee, 1979, p. 39).

Agee wrote about the importance of addressing the peer group in treatment of adolescent juvenile offenders. Specifically, using a positive peer culture to reverse the previously negative influence. This theory was supported by Kizziar and Hagendorn (1979, p. 6) adding that the peer group is important in changing an adolescent's self perception. Groups have been used in the schools and community to provide adolescents with assistance for growth during the tumultuous teen years (Carlson & Lewis, 1988, p. 239). Group therapy is a cornerstone in helping an individual to better meet their needs (Glasser, N., 1980, p. 48).

Glasser (1980, p. 49) describes the basis of Reality Therapy, utilized effectively with groups, as an eight step problem solving process. Glasser further explains that the process helps the client focus on establishing an internal locus of control. The group becomes analogous to the family, providing care and structure (Glasser, 1960, p. 172). Glasser found that it was not unusual for groups to resist the kindness and consistency in attempts to prevent change from comfortable coping mechanisms. He added that following the stormy stage, clients generally change response patterns and gain ego strength.

In addition to the importance of peer groups, adolescents respond in treatment to trusting adult relationships (Breggin & Breggin, 1994, p. 94). Konopka (1966, p. 137)advocates for this premise, proposing that the biggest impact on young women in treatment is the development of a trusting, role model-type relationship with staff. Glasser feels that the core of Reality Therapy is the importance of fortitude in the therapist (1980, p. 221).

Reality Therapy was tested in a longitudinal study at Maine Youth Center (Drummond, 1981). The Center served juvenile offenders in residential treatment. The study found that a consensus of youths reported that they learned new ways of doing things and were optimistic about planning for their future (Drummond, 1981, p. 31). The study also found that Reality Therapy was successful in altering the youths' perspective of locus of control from external to internal.

Residential therapy for juvenile offenders is expanding to meet the needs of the dually diagnosed adolescent (Bogdaniak, 1985, p.5). Bogdaniak indicated that previously the trend in residential treatment was to choose homogeneous populations. Some within the juvenile justice arena believe that with this expansion comes the need to determine the efficacy of treatment programs.

Three independent studies answer this question. Munson and Blincoe (1984, p. 223) did a follow-up study of emotionally disturbed females, 13-18 years old, who completed a residential treatment program. They found significant improvement in personality testing after treatment. Similarly, Klingsporn, Force, and Bursoe (1990, p. 491) studied boys with Conduct Disorder after termination from a treatment program. They found that those who successfully completed the program did better with their families than those who did not complete the program. Mikkelson, Bereika, and McKenzie (1990, p. 31) conducted a three month follow-up of graduates of a short-term treatment program. Their results indicate that two-thirds of successfully discharged youth were still functioning in their families after three months.

Juvenile offenders can benefit from guidance in learning to be responsible for their behavior (Breggin & Breggin, 1994, p.95).

Chapter III

METHODS AND PROCEDURES

The study was conducted in July 1995 at Hope Center's two therapeutic wilderness programs. The Programs are located in East Texas. They are each licensed by the Texas Department of Public and Regulatory Services, meeting the standards for Therapeutic Wilderness Programs. Each may serve up to 55 adolescents, 13-16 years old at the time of placement. Hope Center has two separate campuses, divided by gender.

Youths are referred to the Programs through the Texas Department of Protective and Regulatory Services, Texas Youth Commission, juvenile probation departments throughout the state of Texas, and privately. All the youths are emotionally disturbed. Some have an additional diagnosis including but not limited to; Conduct Disorder, Oppositional Defiant, Attention Deficit Disorder, Poly-Substance Abuse, and Learning Disabled. The Programs are voluntary and all the youths establish their individual behavioral goals prior to arrival to the Programs. Upon arrival, each youth is placed in an age appropriate group which includes up to twelve peers and three Counselors.

Upon embarking on the study, a review of the literature was executed. Studies with similar populations were reviewed. Following this, the Program Directors were approached and the study was explained. Each Director gave verbal permission to survey the students using a one page questionnaire. The Director's were given a copy of the questionnaire. Then, a date was set to dispense the questionnaire.

The instrument utilized to collect the data was generated for the purposes of this study. It was an eleven item questionnaire, see Appendix C. Each item was a closed question, with answers varying from two to five choices. The questionnaire was written in language familiar to the population and at an appropriate reading level. The students answered the questions through self-report. The study is believed to be valid and reliable to the population of Hope Center's Wilderness Programs in the summer of 1995.

The questionnaire was dispensed in a slightly different manner at each Program. This was due to time constraints with the youths' schedule. At both Programs the questionnaire was dispensed in person.

At the Girl's Program, each of five groups was approached individually, in their classrooms, during a regularly scheduled summer school session. The study and questionnaire were explained, with an understanding that completion was voluntary. The students were given the opportunity to ask questions and receive additional information prior to filling out the questionnaire. One student chose not to complete the questionnaire, leaving 43 completed surveys.

At the Boy's Program, the entire Program population convened in the Dining Hall and a similar explanation was given to the group. The questionnaires were dispensed and completed following the discussion. The boys had greater difficulty reading the survey and two youth were assisted by Counseling staff. Three students chose not to complete the survey, eight were not present, 41 completed surveys were generated.

The sample was drawn from the existing population at each of the Wilderness Programs. A predetermined observation number of twenty was set. To narrow the groups down, a systematic sample was done of the completed questionnaires. The questionnaires were separated by gender. Every other questionnaire was selected until 20 observations from each Program were reached. The remaining surveys were discarded.

Data input was conducted at Sam Houston State University in Huntsville, Texas. A Stats Works Program, on a MacIntosh computer was utilized to compute Chi-Square tests. Genders were compared on five different variables. The variables were; number of Serious Incidents, response to what each student felt was most beneficial in the program, probation or parole status, child's opinion of their family's feeling about child's improvement, and the child's opinion of whether they had made behavioral changes. In each test, a level of probability $p < .05$ was determined as significant.

Chapter IV

PRESENTATION AND ANALYSIS OF DATA

Data collected for the study was gleaned from an 11 item questionnaire taken by a sample of 20 Emotionally Disturbed (ED) adolescent boys in a therapeutic wilderness program, with the same questionnaire given to a parallel group of girls. Five different variables were analyzed using Chi-square testing. The computer analysis of the data allowed acceptance of the null hypothesis. This acceptance was based on data not meeting the standard for statistically significant at the $p < .05$ level of significance.

The sample responded to the question: Number of Serious Incidents (SI) in the last 60 days. Data showed 77.50 percent of the sample reporting zero-two. This information is delineated in Table 1. The Chi-Square test showed a score of 3.61 with a level of significance of 0.16. Resulting in an 84% frequency of the males accumulating more SI reports than females. A visual representation of this is located in Figure 1.

Male and female student response patterns were parallel to the question: camp has helped me the most with. The answers to this question asked the youths to choose one of the following; controlling my temper, communicating with my family, school, staying out of legal trouble, and remaining drug free. The Chi-Square value for this variable was 2.57 with a significance of 0.63. Results are in Table 2. Males and females answered with nearly identical numbers of responses to each option,

Table 1. Reported number of Serious Incidents in the last 60 days.

Chi-Square:	3.61	Phi:	0.30	Contingency	
Significance:	0.16	Cramer's V:	0.30	Coefficient:	0.29

Cell Count Row % Column % Total %	Data File: HOPE EFFCETIVENESS STUDY		
	1	2	SER. INCIDENT Totals
1	13 41.94 65.00 32.50	18 58.06 90.00 45.00	31 77.50
2	4 80.00 20.00 10.00	1 20.00 5.00 2.50	5 12.50
3	3 75.00 15.00 7.50	1 25.00 5.00 2.50	4 10.00
GENDER Totals	20 50.00	20 50.00	40 100.00

Column = Gender

1 = males

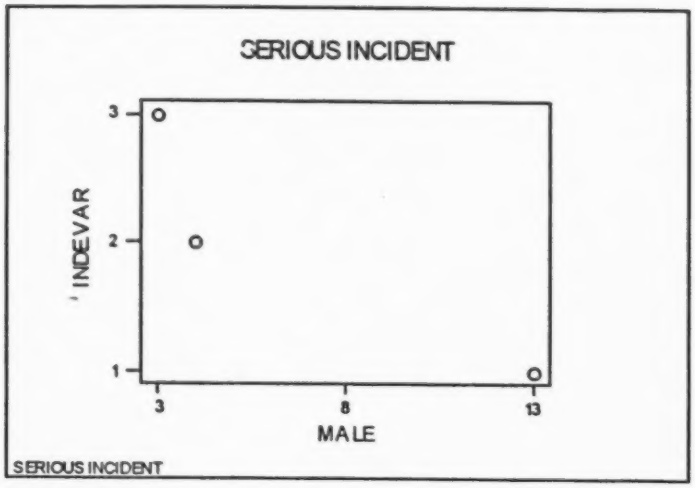
2 = females

Row = Number of Serious Incidents in the last 60 days.

1 = 0-2

2 = 3-5

3 = 6 or more



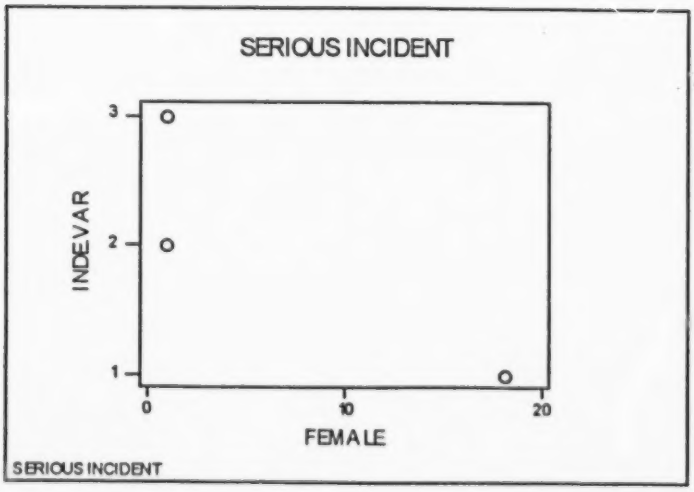


Figure 1. Response rates of Serious Incidents by gender.

1 = 0-2 in last 60 days

2 = 3-5

3 = 6 or more

resulting in an agreement in ranking. This suggests that both males and females believe that their ability to improve their communication with their families has been the most beneficial aspect of the wilderness program. The response pattern is demonstrated in Figure 2.

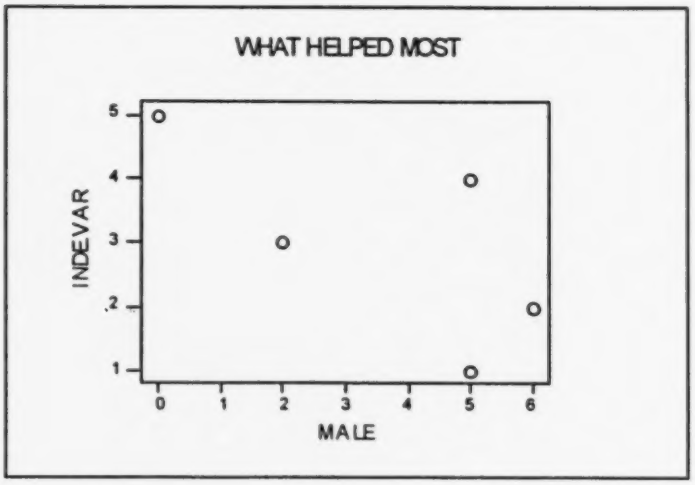
Table 2. Student response to what they found benefitted them most in the Program.

Chi-Square: 2.57	Phi: 0.26	Contingency	
Significance: 0.63	Cramer's V: 0.26	Coefficient: 0.25	

Cell Count Row % Column % Total %	Data File: HOPE EFFCETIVENESS STUDY		
	1	2	HELP MOST Totals
2	6 46.15 33.33 15.79	7 53.85 35.00 18.42	13 34.21
1	5 45.45 27.78 13.16	6 54.55 30.00 15.79	11 28.95
4	5 62.50 27.78 13.16	3 37.50 15.00 7.89	8 21.05
3	2 50.00 11.11 5.26	2 50.00 10.00 5.26	4 10.53
5	0 0.00 0.00 0.00	2 100.00 10.00 5.26	2 5.26
GENDER Totals	18 47.37	20 52.63	38 100.00

Columns:
1 = Males
2 = Females

Rows:
1 = Controlling temper
2 = Communicating w/family
3 = School
4 = Out of legal trouble
5 = Sober



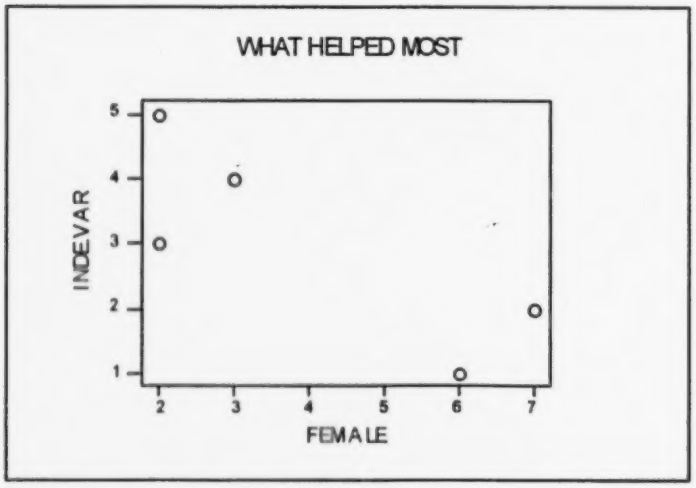


Figure 2. Distribution of responses to aspect of the Program reported to be most beneficial.

y axis = response on survey
1. Controlling my temper
2. Communicating with my family
3. School
4. Staying out of legal trouble
5. Staying sober/drug free

Statistical significance, $p < 0.00$ with a Chi-square of 49.77, was found in response to the variable of probation/parole. Numerically, 75% of males reported being on probation or parole while 47% of females affirmed this question. This can be seen in Table 3. This statistic does not affect the null hypothesis but does reflect a demographic of the population. Figure 3 further illustrates the results of this variable.

Table 3. Report of probation/parole status.

Chi-Square: 49.77	Phi: 1.13	Contingency	
Significance: 0.00	Cramer's V: 1.13	Coefficient: 0.75	

Cell Count Row % Column % Total %	Data File: HOPE EFFCETIVENESS STUDY		
	1	2	PAROLE/PROB Totals
1	15 62.50 75.00 38.46	9 37.50 47.37 23.08	24 61.54
2	5 33.33 25.00 12.82	10 66.67 52.63 25.64	15 38.46
GENDER Totals	20 51.28	19 48.72	39 100.00

Columns:

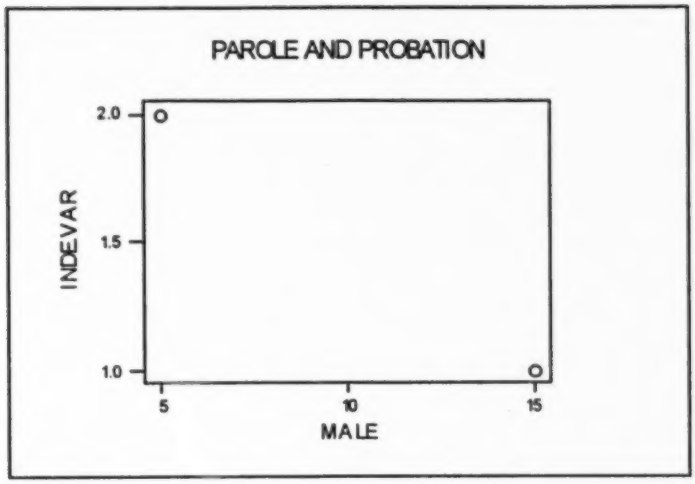
1 = Males

2 = Females

Rows:

1 = Yes

2 = No



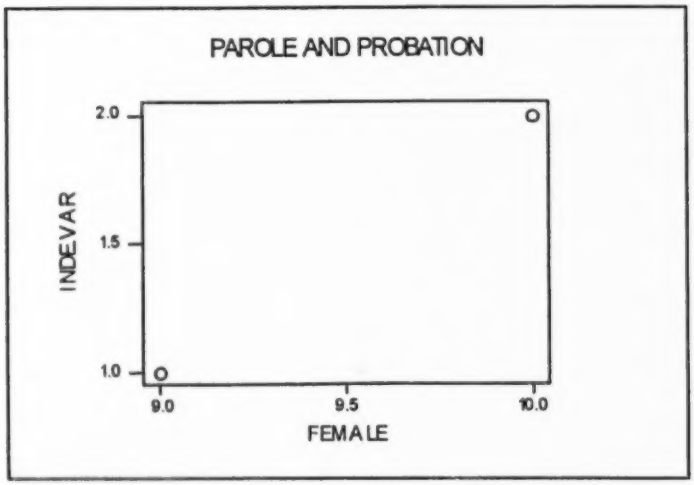


Figure 3. Frequency of males and females on probation or parole.

1 = Yes

2 = No

The analysis of the data collected in this study resulted in the acceptance of the null hypothesis. When working with Emotionally Disturbed adolescents in a therapeutic wilderness program, there is no difference in the success rate based on gender. This was based on the lack of significance in analysis of Serious Incidents. These data support the fact that boys have a higher rate of Serious Incidents and are more likely to be on probation or parole. The data also indicated that boys and girls have similar opinions regarding what the Programs have been most successful in teaching.

The data from the final two variables analyzed also speaks to student opinion. Variables four asks youths for their opinion regarding whether their family agrees their behavior has improved. Data showed a Chi-square of -1.21 with significance at 1.00. This data showed that 89.47% of the youths responded favorably to this question. See Table 4.

Evaluation of data on variable five, youths' belief of their behavior improving since entering the wilderness program, was also computed. This variable generated a Chi-square score of -11.57 with significance of 1.00. All the males sampled affirmed this question with 78.95% of females answering that their behavior had improved. This data is in Table 5.

The preponderance of data in both variable four and five indicates that youths perceive behavioral success resulting from placement in the therapeutic wilderness programs.

Table 4. Child's opinion of whether their family believes that the child's behavior has improved since entering the Program.

Chi-Square:	-1.21	Phi:	-NAN(001).00	Contingency
Significance:	1.00	Cramer's V:	-NAN(001).00	Coefficient: -NAN(001).00

Cell Count Row % Column % Total %	Data File: HOPE EFFCETIVENESS STUDY		
	1	2	FAMILY AGREE Totals
1	19 55.88 95.00 50.00	15 44.12 83.33 39.47	34 89.47
2	1 25.00 5.00 2.63	3 75.00 16.67 7.89	4 10.53
GENDER Totals	20 52.63	18 47.37	38 100.00

Columns:

1 = Males

2 = Females

Rows:

1 = Yes

2 = No

Table 5. Response to youths opinion of their behavioral improvement since entering the Program.

Chi-Square:	-11.57	Phi:	-NAN(001).00	Contingency	
Significance:	1.00	Cramer's V:	-NAN(001).00	Coefficient:	-NAN(001).00

Cell Count Row % Column % Total %	Data File: HOPE EFFCETIVENESS STUDY		
	1	2	IMPROVE BEH Totals
1	20 57.14 100.00 51.28	15 42.86 78.95 38.46	35 89.74
2	0 0.00 0.00 0.00	4 100.00 21.05 10.26	4 10.26
GENDER Totals	20 51.28	19 48.72	39 100.00

Column:

1 = Males

2 = Females

Row:

1 = Improved

2 = Worse

Chapter V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

Juvenile crime is on the rise and some of the crime is perpetrated by Emotionally Disturbed adolescents (Straus, 1994). Review of the literature indicated that treatment programs have been successful at altering the destructive behavior patterns of these youths.

Adolescents enrolled in Hope Center's therapeutic wilderness programs in July 1995 were given an 11 item survey to determine perceived effectiveness of the Programs. The preponderance of data, at 84%, indicated that boys were more likely to be involved in Serious Incidents as reflected on Table 1. The data also reflect, Table 3, parallel responses regarding what component of the Program in which the students found the most benefit. Though not significant, the rank order for each gender is similar. Students reported that they benefit most from learning to communicate with their families while at the programs.

The students opinions clearly support the notion that the Programs are positively impacting their lives. Students also indicated the belief that their families agree that change has occurred.

Conclusions

Significance was found at $p = 0.16$ when measuring the number of Serious Incidents for boys and girls. This is below the significance level needed, $p < .05$, to

reject the null hypothesis. Therefore, the Null Hypothesis was accepted. There was no significant difference between the success of male and female adolescents in a wilderness program.

Recommendations

Should the study be repeated, the following suggestions were offered to future researchers to improve the study process.

1. Consider a longitudinal study, testing and/or surveying the youth at different points in the Program stay.

2. Determine variables, other than overt behaviors, which could assess success in the Programs.

3. Add more open ended questions into the survey to generate opinion.

4. Survey staff and parents as well as students.

5. Utilize student files to gather data about behavioral transgressions instead of relying on self-report.

6. Work with the Program Directors to determine a problem to study and define a null hypothesis. This could lend the study to application when the data has been deciphered.

7. Consider interviewing a sample of the students and staff to improve primary resources.

8. Allow more time to conduct the study.

9. Utilize a control group.

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Appendix A

Hope Center, Youth & Family Services

Wilderness Programs Brochure

A NEW LIFE IN THE OUTDOORS

Troubled teens who have typically run away from or lashed out at authority can find a new life at Hope Center's two wilderness programs. The Bob Lanier Wilderness Program for boys and the Elizabeth G. Lanier Wilderness Program for girls are both located in the piney woods of East Texas. This outdoor setting offers residential therapy for troubled adolescents. Operating as a year-round program since 1974, these two wilderness programs have returned hundreds of teenagers to their families and communities with a new attitude and the social skills to attend school and live cooperatively with others.

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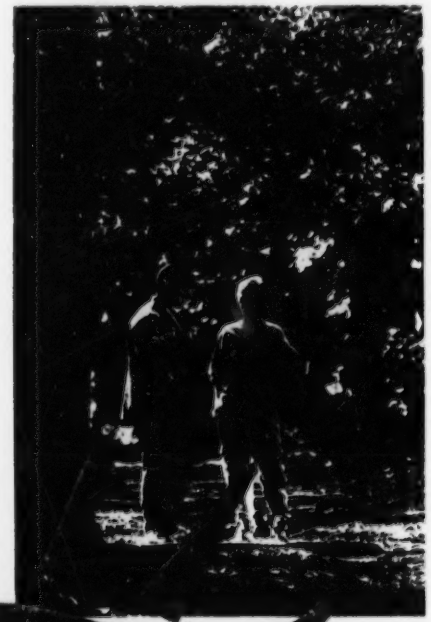

Hope Center acknowledges the contribution and support of

CHAS. P. YOUNG CO.

HOPE CENTER
4115 Yoakum
Houston, Texas 77006
(713) 526-4673

THERAPY

The Hope Center Wilderness Programs employ a multifaceted approach to therapy that allows the teenager to learn acceptable behaviors in a safe environment away from the negative influences that have triggered past undesirable actions. Reality Therapy is utilized to develop better communication and decision-making skills. The teen is challenged to fulfill his/her needs while applying moral principles and maxims which are for the common good.

Virtually all of the youths at the Wilderness Programs either are high risk candidates for future abuse of drugs/alcohol, have previous substance abuse problems, or come from families that abuse. All children are enrolled in substance abuse education classes that were specifically designed for Hope Center by the University of Houston. Additionally, a variety of twelve step (A.A. model) programs are offered by Hope Center's full-time on-site Certified Alcohol and Drug Abuse Counselors (CADAC).

Many of the adolescents referred to the Wilderness Programs are victims of physical or sexual abuse. Survivors groups are available to enable the teen to deal with the emotional aspects of that abuse.

Teenagers are placed in a group that closely matches their age, maturity level, and type of behavior problems. The group lives in the out of doors and, through this environment, a complex, individualized helping plan is implemented for each youth. The reasonable, consistent atmosphere of the Wilderness Program allows a close, personal relationship to develop between the youth and the counselors.

A new sense of responsibility is learned with each group planning all of its activities, from designing and building living structures to planning and cooking some of the meals. Within the group structure, youths find understanding, help others solve problems, and develop goal setting skills.

SCHOOL

In the year-round academic program, Hope Center integrates the approved curriculum with everyday learning opportunities. Instructional experiences are pursued in both the conventional classroom and in the myriad of other activities that engage the group. Students are enrolled in an individualized academic program that allows each child to fill the educational gaps that were developed due to previous school or attendance problems.

Both programs have on-site teaching facilities staffed by Special Education Teachers. All course work is done under the auspices of local independent school districts with credits transferable throughout the state of Texas.

STAFF

The staff at Hope Center Wilderness Programs is composed of experienced licensed Childcare Administrators, Certified Social Workers, Educational Diagnosticians, Special Education Teachers, and other qualified personnel. Additionally, Hope Center employs or contracts with psychologists and family therapists who will provide consultation and advice when needed.

ACCEPTANCE CRITERIA

Age: 13.0 - 16.0 years at the time of admission.

Intelligence: Youths must have a Full Scale I.Q. of 70 or above.

Physical Handicaps: Youths must not have physical limitations which would preclude functioning in an outdoor setting.

Emotional Status: Youths must be in touch with reality and not be considered a high risk of danger to themselves or others. Youths must not be psychotic or require 24-hour supervision by awake staff.

Drug Dependency: Youths must not require detoxification.

Legal Status: Youths must be residents of Texas. The legal status of youths must be clearly determined prior to placement. Consent for placement can only be given by the youth's parents and/or managing conservator, who will carry the primary responsibility for the relationship with Hope Center.

Commitment to Placement: Each youth must agree to placement and make a commitment to be involved in the treatment process. No youth is accepted for placement without commitment by the youth and family/managing conservator to work toward achieving the identified goals. Families are encouraged to participate in ongoing family therapy, parent education groups, and/or attend the bimonthly parents' meetings held at the Hope Center offices.

REFERRAL PROCESS

Referrals to the wilderness programs are accepted from Juvenile Probation Departments, the Department of Human Services, the Texas Youth Commission, Mental Health and Mental Retardation Authority, private practitioners, families, and other people who are responsible for the care of a youth.

REFERRAL PACKET

Referral packets are available from a Family/Youth Worker at Hope Center, (713) 526-HOPE. The packets contain complete placement information.

Appendix B

Cover Letter for Questionnaire

July 24, 1995

Dear Hope Center Students,

I would like your help with something. I am in school and taking a class this summer called Methods of Research. As part of my work for the class, I have written a one page questionnaire. What I need you to do is complete the questionnaire, using the computer form attached, please do not put your name on the form.

I have spoken with the Director and have received permission for all of you to participate. Once you have completed the questionnaire, I plan to look at everyone's answers together. That means that no one will know how any of you answered the questions and that all the information will be grouped to see how we can improve the Program.

Please complete the questionnaire and give it to your Counselor by **THURSDAY JULY 26, 1995.**

When I finish with my class I will be happy to tell you what information I learned about the Program.

Thank you for your help, if you have any questions about the questionnaire, my class, or the results, please ask your counselor to contact me.

Sincerely,

Ann Sweeney Barker
Caseworker Supervisor

ENCLOSURE.

Appendix C, QUESTIONNAIRE

DIRECTIONS: ANSWER EACH QUESTION BY COLORING THE SPACE, NEXT TO THE CORRECT NUMBER, ON THE COMPUTER SHEET PROVIDED.

51. Age: (A) 13-14 (B) 15 (C) 16-17

52. Sex: (A) Male (B) Female

53. How many months have you been at camp.

(A) 0-3 (B) 4-6 (C) 7-9 (D) 10-12 (E) 12 or more

54. How many times have you been restrained in the last 2 months?

(A) 0-2 (B) 3-5 (C) 6 or more

55. How many AWOP reports have you had in the last two months?

(A) 0-2 (B) 3-5 (C) 6 or more

56. How many Serious Incident reports have you had in the last two months?

(A) 0-2 (B) 3-5 (C) 6 or more

57. How many runaway reports have you had in the last 2 months?

(A) 0-2 (B) 3-5 (C) 6 or more

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58. I am on probation or parole.

(A) Yes (B) No

59. Since entering camp, my behavior is

(A) Improved (B) Worse

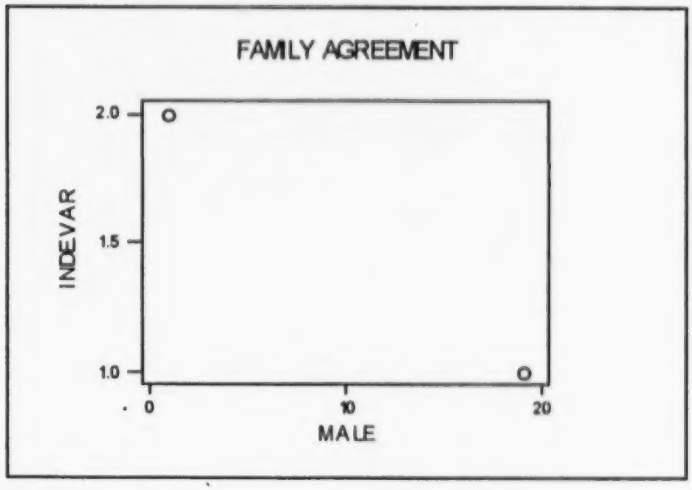
60. My family believes that my behavior has improved since entering the Program.

(A) Agree (B) Disagree

61. Camp has helped me most with: (pick one)

(A) Controlling my temper
(B) Communicating with my family
(C) School
(D) Staying out of legal trouble
(E) Staying sober/drug free

Appendix D
Unused Figures



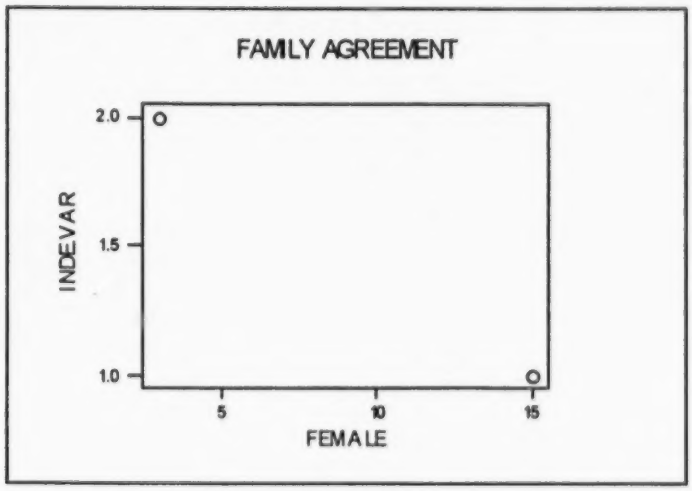
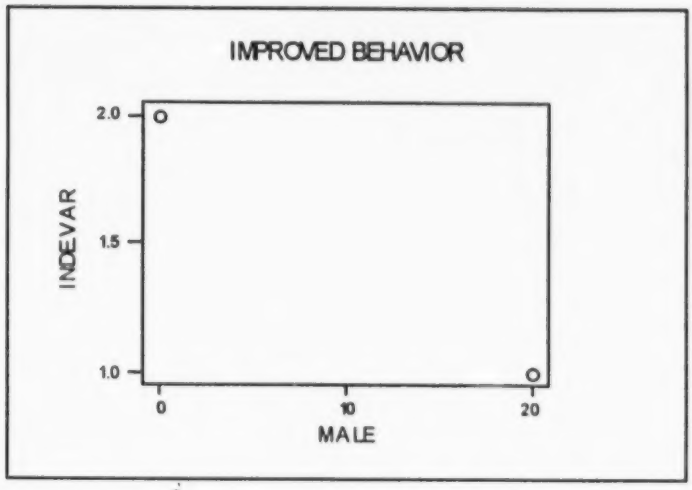


Figure 4. Frequency of child reporting that their family believes the child's behavior has improved.

1 = Yes 2 = No



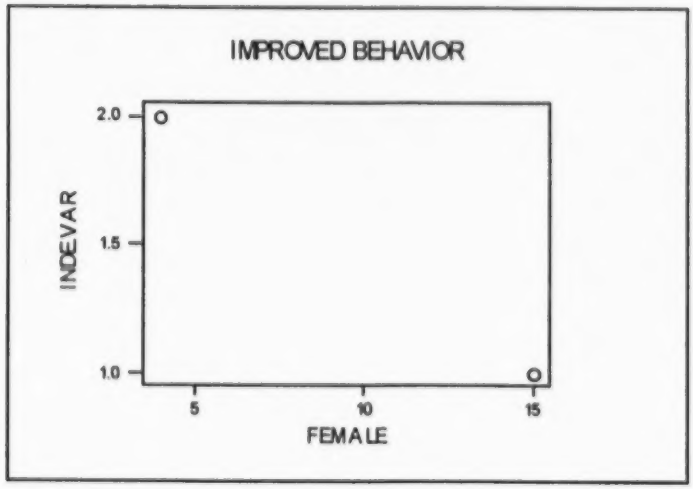


Figure 5. Response rates to child feeling their behavior has improved since entering the Program.

1 = Yes 2 = No

Appendix E

Raw Data

HOPE EFFCETIVENESS STUDY

	GENDER	SER. INCIDENT	PAROLE/PROB	IMPROVE BEH	FAMILY AGREE	HELP MOST
1	1	1	1	1	1	2
2	1	1	1	1	1	2
3	1	1	1	1	1	1
4	1	1	2	1	1	1
5	1	2	1	1	1	4
6	1	1	1	1	1	3
7	1	3	1	1	1	2
8	1	3	1	1	1	4
9	1	1	1	1	1	4
10	1	1	1	1	1	
11	1	1	1	1	1	
12	1	2	1	1	1	4
13	1	1	1	1	1	4
14	1	1	1	1	1	1
15	1	2	1	1	1	2
16	1	1	2	1	2	3
17	1	1	2	1	1	2
18	1	3	2	1	1	1
19	1	2	2	1	1	1
20	1	1	1	1	1	2
21	2	1	2	1	1	2
22	2	1	1	1	1	2
23	2	1	2	1	1	3
24	2	1	2	1	1	2
25	2	1	1	1	1	2
26	2	1	2	1	2	2
27	2	1	1	1	1	1
28	2	1	2	1	1	3
29	2	1				1
30	2	1	2	2	2	5
31	2	1	1	1	1	1
32	2	2	2	1	1	1
33	2	3	2	1	1	2
34	2	1	2	1	1	2
35	2	1	1	2		4
36	2	1	1	2	2	5
37	2	1	2	1	1	1
38	2	1	1	1	1	4
39	2	1	1	1	1	4
40	2	1	1	2	1	1